

COMMERCIAL **BUILDING PERMIT APPLICATION**



*Applicant to complete all required spaces JOB ADDRESS (CORRECT ADDRESS IS REQUIRED TO PROCESS THIS APPLICATION) BLOCK * / RESERVE * SUBDIVISION * / SHOPPING CENTER * **DESCRIPTION*** 3. OCCUPANT* MAILING ADDRESS PHONE 3. BUILDING OWNER * MAILING ADDRESS ZIP PHONE/FAX 4. DESIGN PROFESSIONAL* MAILING ADDRESS ZIP PHONE/FAX 5 CONTRACTOR * MAILING ADDRESS 7IP PHONE/FAX 6 USE OF BUILDING* NEW ٿ REPAIR ث ್ತೆ MISCELLANEOUS ADDITION ್ತೆ ALTERATION 7. CLASS OF WORK*: 8. DESCRIBE TYPE OF WORK YOU ARE PERFORMING*: 9. TDLR PROJECT NUMBER *(TEXAS DEPARTMENT OF LICENSING AND REGULATION REQUIRES ALL NON RESIDENITAL projects that exceeds \$50,000.00 in cost. Then a project number will be assigned to the project and must be provided to the City on this application prior to acceptance of plans). (To register call 512-463-7357) **TDLR NUMBER:** 10. FLOOD ZONE *: 11. TOTAL VALUATION OF 12. TYPE OF ROOF*: 13. BUILDING HEIGHT*: 14. SLAB ELEVATION*: YES NO WORK*: **Slab/lowest floor of structure in flood prone area shall be certified by a Special Conditions: Within this proposed Occupancy are there any registered engineer or registered public surveyor to be 12 inches above products provided for Human Consumption? (circle) Yes or No the base flood elevation. If Yes, please describe: A stamped form survey with slab form MSL elevation shall be submitted at Slab inspection. NOTICE SEPARATE PERMITS ARE REQUIRED FOR DRIVEWAY, DRIVEWAY APPROACHES,
PUBLIC WALKS, RAMPS, SIGNS, ELECTRICAL, MECHANICAL, PLUMBING, HEATING,
OR VENTILATING. THIS PERMIT BECOMES NULL AND VOID IF WORK OR
COSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF
CONSTRUCTION IS SUSPENDED OR ABANDONED FOR A PERIOD OF SIX MONTHS AT APPLICANT NEEDS TO COMPLETE THE FOLLOWING SPACES BELOW. State N/A to those sections that do not apply to the structure or work you are performing. ANY TIME AFTER WORK IS COMMENCED. Construction Type Occupancy Group Occupant Load I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF 1st Floor (S.F) Number of Stories Parking Spaces WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. 2nd Floor (S.F) **Total Paving** Use Zone **FOR OFFICE USE ONLY** Fire Sprinkler Req. Yes or No 3rd Floor (S.F.) Lot Size PLAN REVIEW FEE: Amount due at the time of submittal Plan Review Fee x .50 _____ Garage (S.F.) Total Building (S.F.) % Lot Coverage **Approvals** Accepted by PSR _____ Date Building Official Date SIGNATURE OF APPLICANT DATE Director of Planning Date PRINTED NAME OF APPLICANT PHONE NUMBER Application Number ___ F-MAIL ADDRESS Building Permit fee shall be paid after plan review is completed Building Permit Fee ____

FAX NUMBER

A. Building

Less than \$1,000 No fee, unless an inspection is required, in which

case a \$15.00 fee for each inspection shall

be charged.

\$1,000 to \$49,999.99 \$15.00 for the first \$1,000.00 plus \$5.00 for each

additional thousand or fraction thereof, to and

including \$49,999.99

\$ 50,000.00 to \$99,999.99 \$260.00 for the first \$50,000 plus \$4.00

for each additional thousand or fraction thereof, to and including \$99,999.99

\$100,000 to \$499,999.99 \$460.00 for the first \$100,000 plus \$3.00

for each additional thousand or fraction thereof to and including \$499,999.99

\$ 500,000 and Up \$1600.00 for the first \$500,000 plus \$2.00 for each

additional thousand or fraction thereof.

B. Moving Fee For the moving of any building or structure,

the fee shall be \$100.00.

C. Demolition Fee: For the moving of any building or structure,

the fee shall be \$50.00 0 up to 100,000 cu ft \$.50 100,000 cu ft and over per 1,000 cu. Ft.

D. Plan-checking fee:

When the valuation of the proposed construction exceeds \$1,000.00 and a plan review is required to be submitted by 103.2, a plan-checking fee shall be paid to the building official at the time of submitting plans and specifications for plan checking. A plan-checking fee shall be equal to one-half of the required building permit fee as set forth in 103.7.4. **Such plan-checking fee is** <u>in addition to the building permit fee.</u>

E. Penalties

Where work for which a permit is required by this Code is started or proceeded prior to obtaining a permit, the fees herein specified shall be doubled, but the payment of such double fees shall not relieve any persons from fully complying with the requirements of this Code in the execution of the work nor from any other penalties prescribed herein.



PLANNING/PERMITS AND INSPECTION DIVISION ARCHITECTURAL BARRIERS PROJECT FORM

PROJECT ADDRESS			_
OWNER			 _
☐ This project involves publ	ic finds, public land, or is a state le	ease.	
☐ This project is privately fu	inded, on private land for private us	se.	
Building/Facility Owner Not	Tenant)	Name	
Mailing Address		Phone No.	_
All plans and specifications for construction or for substantial renovation, modification, or alteration of a building or facility that has as estimate construction cost of \$50,000 or more and that is subject to the provisions of the Texas Civil Statues, Article 9102 shall be submitted to the Texas Department of Licensing and Regulation for review and approval. Information below must be submitted to City of Missouri City Inspections prior to issuance of Building permit.			
_	t have an estimate construction cost trequire 100% compliance with T	t of less than \$50,000 require no submittal DLR.	l to TX Dept. of
Signature		Date	
☐ Construction documents h Project #:		epartment of Licensing and Regulation.	
☐ Construction documents h	ave been submitted to the following	g contact provider.	
Name	RAS#	Telephone	<u> </u>
☐ I hereby notify the Texas Department of Licensing and Regulation of the described project and of my intent to perform, or cause to be performed, all services necessary to design said project in accordance with the provisions of Article 9102, Texas Civil Statutes. I certify that I am the owner/contractor/registered design professional with overall responsibility for the design of the project and whose seal is affixed to the construction documents.			
Signature	Title		
E-mail Address	Date		_

^{**}Should you have any questions on any of the above, you may contact the TDLR at 1-800-803-9202.